

INVENTOR INFORMATION

Inventor One Given Name:: Shon D
Family Name:: Steger
Postal Address Line One:: 4460 Hodges Boulevard, #901
City:: Jacksonville
State or Province:: Florida
Country:: U.S.A.
Postal or Zip Code:: 32224
City of Residence:: Jacksonville
State or Province of Residence:: Florida
Country of Residence:: U.S.A.
Citizenship Country:: U.S.A.
Inventor Two Given Name:: Stephen M
Family Name:: Herrington
Postal Address Line One:: 1628 Brighton Bluff Court
City:: Orange Park
State or Province:: Florida
Country:: U.S.A.
Postal or Zip Code:: 32003
City of Residence:: Orange Park
State or Province of Residence:: Florida
Country of Residence:: U.S.A.
Citizenship Country:: U.S.A.
Inventor Three Given Name:: Brian S
Family Name:: Schumacher
Postal Address Line One:: 2338 Milford Lane
City:: Jacksonville
State or Province:: Florida
Country:: U.S.A.
Postal or Zip Code:: 32246
City of Residence:: Jacksonville
State or Province of Residence:: Florida
Country of Residence:: U.S.A.
Citizenship Country:: U.S.A.
Inventor Four Given Name:: Kevin T
Family Name:: Stone
Postal Address Line One:: 12893 Meaghan Court
City:: Jacksonville
State or Province:: Florida
Country:: U.S.A.
Postal or Zip Code:: 32225
City of Residence:: Jacksonville
State or Province of Residence:: Florida
Country of Residence:: U.S.A.
Citizenship Country:: U.S.A.
Inventor Five Given Name:: Jeffrey A
Family Name:: Duncan
Postal Address Line One:: 12657 Chapel Town Circle
City:: Jacksonville

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CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 27572
Fax One:: (248) 641-0270

APPLICATION INFORMATION

Title Line One:: METHOD AND APPARATUS FOR BONE FRACTURE F
Title Line Two:: IXATION
Total Drawing Sheets:: 10
Formal Drawings?:: Yes
Application Type:: Utility
Docket Number:: 5490-127CPC
Secrecy Order in Parent Appl.?:: No

REPRESENTATIVE INFORMATION

Representative Customer Number:: 27572

CONTINUITY INFORMATION

This application is a:: CONTINUATION IN PART OF
> Application One:: 10/047,520
Filing Date:: 10-29-2001

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